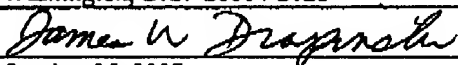
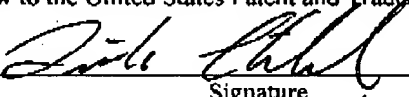


TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/287,296			
		Filing Date	April 7, 1999			
		First Named Inventor	Yun, et al.			
		Group Art Unit	3691			
		Examiner Name	Thy Thao Havan			
Total Number of Pages in This Submission	17	Attorney Docket Number	002566-013000			
ENCLOSURES (check all that apply)						
<table border="0"> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment Under 37 C.F.R. § 1.111 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </td> <td style="vertical-align: top;"> <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Accept an Unintentionally Delayed Claims for Priority Under 37 C.F.R. §1.78(a)(3) <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CID, Number of CID(s) _____ </td> <td style="vertical-align: top;"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below): </td> </tr> </table>				<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment Under 37 C.F.R. § 1.111 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Accept an Unintentionally Delayed Claims for Priority Under 37 C.F.R. §1.78(a)(3) <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CID, Number of CID(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-3557 for the above identified docket number.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm or Individual name	James W. Drapinski Reg. No. 46,242 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128					
Signature						
Date	October 25, 2007					
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]						
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<input type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450						
<input checked="" type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (571) 273-8300.						
October 25, 2007 Date		 Signature Linda Clia Kenbeard Typed or printed name				

Attorney Docket No. 002566-013000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT application of)

Yeogirl YUN, et al.)

Serial No. 09/287,296)

Filed: April 7, 1999)

For: METHOD AND APPARATUS FOR)
DEFINING DATA OF INTEREST)

Confirmation No. 3718

Group Art Unit: 3691

Examiner: Thy Thao Havan

Date: October 25, 2007

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Signature: 

Name: Linda Clinkenbeard

AMENDMENT UNDER 37 C.F.R. § 1.111

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The following Amendments and Remarks are made in response to the Office Action mailed July 26, 2007. Reexamination and reconsideration of the application in light of the following Amendments and Remarks are respectfully requested.

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 11 of this paper.

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